

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	6/21/99
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	8	7-1-99
FORMALITY REVIEW	<i>[Signature]</i>	88518	7/8/99 8/18/99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
1	Final 8/1/99
2	Original 10/23/02
3	1/24/03
4	5/9/03
5	1/11/04
6	8/3/05
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy